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ATTENTION: Examiner Hui
FIRM/CO. NAME: U.S. Patent and Trademark Office
FAX NO: 703-872-9306
FROM: Ashok K. Janah
DATE: January 5, 2005
APPLICATION NO: 09/851,226
OUR REFERENCE NO: NK.73.00

TOTAL NUMBER OF PAGES 18 (INCLUDING COVER PAGE)

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BUSINESS PHONE: (415) 538-1555 FACSIMILE NO.: (415) 538-8380

MESSAGE:

Examiner Hui:

This RCE and Amendment being filed in Response to the Office Action
dated May 5, 2004.

Kind regards,

Christy Hennigan

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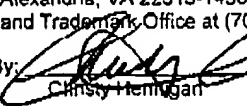

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Weers et al.	Group No: 1617
Application No: 09/851,226	Examiner: San Ming R. Hui
Confirmation No: 4017	Attorney Docket No: NK.0073.00
Filed: 05/08/2001	Wednesday, January 05, 2005
Title: PHOSPHOLIPID-BASED POWDERS FOR DRUG DELIVERY	San Francisco, CA 94107

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Extension of Time <input type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136													
Papers Enclosed <input checked="" type="checkbox"/> Amendment Filed with RCE <input checked="" type="checkbox"/> Request for Continued Examination (RCE) <input type="checkbox"/> Associate Power of Attorney Statement <input type="checkbox"/> Notice of Appeal (form PTO/SB31) <input type="checkbox"/> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-SB08 Form <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return (1)	Extension (Months) <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months	<table border="1"> <tr> <th colspan="2">Extension Fee</th> </tr> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> <tr> <td>\$120.00</td> <td>\$60.00</td> </tr> <tr> <td>\$450.00</td> <td>\$225.00</td> </tr> <tr> <td>\$1,020.00</td> <td>\$510.00</td> </tr> <tr> <td colspan="2">Total \$ 0.00</td> </tr> </table>	Extension Fee		Large Entity	Small Entity	\$120.00	\$60.00	\$450.00	\$225.00	\$1,020.00	\$510.00	Total \$ 0.00	
	Extension Fee													
	Large Entity	Small Entity												
	\$120.00	\$60.00												
	\$450.00	\$225.00												
\$1,020.00	\$510.00													
Total \$ 0.00														
<input checked="" type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.														

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	81	59	22	\$50.00	\$25.00	\$1100.00
Independent Claims	7	5	2	\$200.00	\$100.00	\$200.00
Multiple Dependent Claims			0	\$300.00	\$150.00	\$0.00
Supplemental Information Disclosure Statement						
Total						\$1300.00

*No new claims in the present amendment, but claims were miscounted in the last amendment transmittal

Fee Payment <table border="1"> <tr> <td>Extension Fees</td> <td>\$0.00</td> </tr> <tr> <td>Fees for Extra Claims</td> <td>\$1300.00</td> </tr> <tr> <td>RCE Fee</td> <td>\$790.00</td> </tr> <tr> <td>Total</td> <td>\$2,090.00</td> </tr> </table>	Extension Fees	\$0.00	Fees for Extra Claims	\$1300.00	RCE Fee	\$790.00	Total	\$2,090.00	Fee Deficiency <input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> . and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u> .
Extension Fees	\$0.00								
Fees for Extra Claims	\$1300.00								
RCE Fee	\$790.00								
Total	\$2,090.00								
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>10-0258</u> in the sum of \$2,090.00 .	Please direct telephone calls to: Ashok K. Janah at (415) 538-1555 Please continue to send correspondence to: Guy Tucker Nektar Therapeutics 150 Industrial Road San Carlos, CA 94070.								
CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a): I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office at (703) 872-9306 on the date shown below. By:  Date: <u>January 5, 2005</u> Christy Hennigan	Respectfully Submitted, By:  Date: <u>January 5, 2005</u> Ashok K. Janah Registration No. 37,487								

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